



1. Personal Details

Doctoral degree		E-mail	
Last name		Telephone (private)	
First name		Business telephone	
Date and place of birth		Institute/Clinic (OE)	
Citizenship		<u>Private adress</u>	
Child(ren) (please also provide birth date)			
		<u>Business adress</u>	
Single parent	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Responsible for home care?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Degree of disability <input type="checkbox"/> Yes %	

2. Details on occupational area and employment

Degree program:
Area of professional training:
started in:
Extent of working hours %
Is your employment limited? <input type="checkbox"/> no <input type="checkbox"/> yes, until
Current field of responsibility

3. Are you funded by a research association? (e.g. SFB, FOR)?

Yes, namely: No



4. Doctorate

started in year _____ completed in year _____

5. What are your next planned steps concerning your career or scientific projects?
(e.g. publication, research etc.)

6. Do you have a specific career objective?

7. Teaching and supervision responsibilities (please provide evidence if applicable)

a. Teaching (estimated hours, number of courses / seminars)

b. Supervision (BA, MA, number of students, estimated hours)

8. Did you raise third-party funds?

(including: scholarships, prize money, participation in proposals)

9. Publications, presentations and posters (please provide a separate list)

10. Are you involved in committee work at the MHH?



11. Interests and desired support by the program

(multiple answers possible)

Career objectives in science

- Supervision at professional advancement in science
 - Career planning in my field
 - Third-party funding and research funding applications
 - In-depth knowledge about structures, processes and rules in science
 - Temporary stay abroad and international cooperations
 - Strategies for applications and appointment processes
 - Integration into teaching and creation of a teaching concept
 - Support in strategic publication planning
 - Support in planning of habilitation
 - Others, please specify
-

Acquisition of competences – technical competences

- Translational research
 - Scientific research
 - Clinical activity/health care
 - Humanities
 - Preparation for the specialist medical examination
 - Others, namely:
-

Acquisition of competences – extracurricular competences

- Compatibility of career and family/private life
 - Compatibility of clinical and scientific work
 - Supervision of students (promotion of young researchers)
 - Others, namely:
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Communication/Networking

- Integration into career-relevant networks
 - Promoting the visibility of female scientists
 - Committee
 - Others, namely:
-

12. Qualification program

Which workshop topics are you particularly interested in? (Please choose a **maximum of 3** events)

- Research funding, acquisition of third-party funds
 - Leadership competence
 - Good scientific practice¹
 - Communication and conflict management
 - Communication especially with male interlocutors
 - Potential analysis and career planning
 - Self-presentation
 - Networking
 - Others, namely:
-

13. Please enclose the following documents with this profile sheet:

- a curriculum vitae in tabular form with scientific career (in chronologically descending order)
- Letter of motivation (expectations of the mentoring program, the mentoring partnership and your personal situation, that's motivates your application)

Please submit your application with **all documents included in one PDF file** to earlycareer@mh-hannover.de by 1st May 2022.

If you have any questions, please contact Johanna Prien-Kaplan: earlycareer@mh-hannover.de or call +49 (0) 511 532 – 84081.

Declaration of consent

I agree that my data will be included in the file of female scientists and that my e-mail address will be included in the e-mail distribution list of female scientists of the Equal Opportunities Office of the MHH. I am aware that the data will be used anonymously for research purposes even after the end of the Early Career Mentoring Program.

In the event of acceptance, I agree to the storage of personal data for the purpose of event management as well as the appropriate forwarding of the data to the respective mentor. I know that I can revoke this consent in whole or in part at any time with effect for the future.

I have taken note of the attached data protection agreement in accordance with the DSGVO.

Place, date

Signature

¹ The term "good scientific practice" refers to the guidelines of all scientific work.